Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			12				I	RATE	FEE	!	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		•	BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS) minus 20=		18			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS) mir	nus 3 =	*/			X42=		OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT		/			+140=		OR	+280=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2	ı	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II]	OTHER	THAN	
	•	(Column 1)		(Colu		(Column 3)	SMALL	ENTITY	OR	SMALL	1		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total-	• 2	Minus	** 2	20	-		X\$ 9=	The Market	OR	X\$18=		
	Independent	NTATION OF MI	Minus	***	3			X42=	-	OR	X84=	•	
	FIRST PRESE	NIATION OF MI	JUIPLE DEF	ENVEN	CLAIM			+140=.		OR	+280=		
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• ,	Minus	**		9		X\$ 9=	·	OR	X\$18=		
	Independent	+	Minus	***	T C1 A11A	-	11	X42=		OR	X84=		
<u> </u>	FIRST PRESE	NTATION OF MU	JUITE DEF	ENDEN	CLAIM		ן נ	+140=		OR	+280=		
	L. Ai									OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		8] [X\$ 9=		OR	X\$18=		
	Independent	*	Minus	###	T CL AIDA	<u> </u>	┨╏	X42=		OR	X84=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=									OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** Apply FEE										OB.	TOTAL		
-	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***Off the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												